

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10079027

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|---|--------------|--------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20 = | |
| INDEPENDENT CLAIMS | minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|---|-------|---|------------------|
| | Total | Minus | ** 35 | = |
| Independent | * 4 | Minus | *** 4 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

SMALL ENTITY
TYPE OR

OTHER THA
SMALL ENTIT

| | | | |
|-----------|--------|--------------|-----|
| RATE | FE | RATE | FE |
| BASIC FEE | 150.00 | OR BASIC FEE | 300 |
| X\$ 25= | | OR X\$50= | |
| X100= | | OR X200= | |
| +180= | | OR +360= | |
| TOTAL | | OR TOTAL | |

OTHER THA
SMALL ENTITY OR SMALL ENTIT

| | | | |
|------------------|------------------------|---------------------|------------------|
| RATE | ADDI- TIONAL FEE | RATE | AD TIOI FE |
| X\$ 25= | | OR X\$50= | |
| X100= | | OR X200= | |
| +180= | | OR +360= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|---|-------|---|------------------|
| | Total | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| | | | |
|------------------|------------------------|---------------------|------------------|
| RATE | ADDI- TIONAL FEE | RATE | AD TIOI FE |
| X\$ 25= | | OR X\$50= | |
| X100= | | OR X200= | |
| +180= | | OR +360= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|---|-------|---|------------------|
| | Total | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| | | | |
|---------|------------------------|-----------|------------------|
| RATE | ADDI- TIONAL FEE | RATE | AD TIOI FE |
| X\$ 25= | | OR X\$50= | |
| X100= | | OR X200= | |
| +180= | | OR +360= | |